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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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		2003-0667.02					
		Amanda K. Bridges					
Title	Email Confirm	nation For Specified Task At Print Device					
Expres		EU318640890US					

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450										
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages 12] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS										
4. X Drawing(s) (35 U.S.C. 113) [Total Sheets	9. X Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO 1449 Citations 13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:										
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:											
Continuation Co											
19. CORRESPONDENCE ADDRESS											
X Customer Number: 21972	OR Correspondence address below										
Name											
Address											
City	State Zip Code										
Country	Felephone Fax										
Name (Print/Type) Christine K. Garcia Signature	Registration No. (Attorney/Agent) 41,027 Date 123194										

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and/by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
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CEE TOAN	ı	Complete if Known							
FEE TRAN	┗▐	Application Number							
for TV		Filing Date							
for FY		First Named Inventor Amar			tor Amano	la K. Bridges			
Effective 10/01/2003. Patent fees an		Examiner Name							
Applicant claims small entity state	-	— Art Unit							
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METHOD OF PAYMENT (c)		FEE CALCULATION (continued) 3. ADDITIONAL FEES							
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Account Lexmark Intern	ational, Inc.	1052	50	2002		cover sheet			
Name The Director is authorized to: (check all the	nat apply)	1053	130	1053		Non-English spe	cification est for <i>ex parte</i> reexamination		
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$\overline{\overline{\mathbf{X}}}$ Charge any additional fee(s) or any unde	1804	920"	1804		Examiner action		<u> </u>		
Charge fee(s) indicated below, except for the above-identified deposit account.	1805	1,840*	1805		Requesting publi Examiner action	ication of SIR after			
FEE CALCULAT	1251	110	2251			ply within first month			
1. BASIC FILING FEE			420	2252			oly within second month		
Large Entity Small Entity	. For Botal	1253	950	2253			oly within third month		
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1001 770 2001 385 Utility filing	fee 770.00	1255	2,010	2255	1,005	Extension for rep	oly within fifth month		
1002 340 2002 170 Design filin		1401	330	2401	165	Notice of Appeal	l		
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1004 770 2004 385 Reissue fili	ng fee	1403		2403		Request for oral			
1005 160 2005 80 Provisional	filing fee	1451		1451		*	te a public use proceeding		
SUBTOTAL	(1) (\$) 770.00	1452		2452			n to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UT	LITY AND REISSUE		1,330	2453			on to revive - unintentional		
Extra Claim	Fee from	1301	1,330 480	2501 2502		Utility issue fee (Design issue fee			
Total Claims 33 -20** = 13	× 18 = 234	1502		2502		Plant issue fee	•		
Independent 4 - 3** = 1	x 86 = 86	1460		1460			ns to the Commissioner		
Multiple Dependent	1807	50	1807	50	Processing fee u	ssing fee under 37 CFR 1.17(q)			
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	scription	1806 8021	40	8021	40	Recording each	patent assignment per number of properties)	40.00	
	excess of 20	I		2809			number of properties) ion after final rejection	+0.00	
	ent claims in excess of 3	1809	770	2009		(37 CFR 1.129(a			
	ependent claim, if not paid	1810	770	2810		For each addition examined (37 C	nal invention to be FR 1.129(b))		
	ginal patent	1801	770	2801	385	Request for Con	tinued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			900	1802	900	Request for export of a design app	edited examination lication		
SUBTOTAL (2)		Other fee (specify)							
**or number previously paid, if greater, i	*Red	educed by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00					40.00		
SUBMITTED BY						(Complete (if applicable)			
Name (Print/Type) Christine K.		Registration No. (Attorney/Agent) 41,027 Telephone 859-232-7846				346			
Signature Christin	JU HA	\leq	₁ ,	,,,,qoqq	<u> </u>		Date 1/23/	64	

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